

MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES STATE PUBLIC HEALTH LABORATORY BREATH ALCOHOL PROGRAM DATAMASTER MAINTENANCE REPORT

RECEIVED

By Carol Day at 8:44 am, Feb 07, 2014

| | vign. — | | | | | | |
|---|---|-------------------|----------------------------|---|---|--------------------------------------|--|
| Complete this report at the time of the regular monthly preventive maintenance check (not to exceed 35 days). Complete this report whenever the instrument is serviced or repaired and whenever it is placed into service. Retain the original and send a copy within 15 days to the Breath Alcohol Program, DHSS. | | | | | | | |
| | DATAMASTER SN NAME OF AGENCY | | | | DATE OF INSPECTION | | |
| 1 | 201302 St. Joseph Police Department | | | | 02-06-14 | | |
| LOCATION OF INSTRUMENT (STREET AND CITY) | | | | TIME OF INSPECTION | | | |
| | Faraon St. Joseph | | ab Ham If found to be out | liofootory or if operatin | 02-06-14 1355 | limite (M/rite in observed values | |
| CHECKLIST: Place a mark in the box by each item if found to be satisfactory or if operating within established limits. (Write in observed values where determined.) Unmarked items must be corrected before using instrument. | | | | | | | |
| Image: Control of the | DIAGNOSTIC CHECK (PRINTOUT ATTACHED) | | | DATE AND TIME | DATE AND TIME (from printout) 02-06-14 1355 | | |
| | COMPUTER | | | DETECTOR | DETECTOR | | |
| | PROGRAM | | | FILTERS | | | |
| | HEATERS SA | MPLE CHAMBER 49 |)oc | QUARTZSTAN | NDARD - | | |
| | ☑ FLOW DETECTOR | | | □ CALIBRATION | ☑ CALIBRATION | | |
| | PUMP HIGH 8 | SPEED | | PRINTER | | | |
| × | INDICATOR LIGH | TS | | | | | |
| \boxtimes | SIMULATOR SOL | UTION SUPPLIER F | lepCo | LOT # <u>1</u> | 2002 EX | XRDATE 08-29-14 | |
| \boxtimes | SIMULATOR TEMP (34'C ± 0.2'C) 34.0 oc SIMULATOR SN SD3330 EXP. DATE 01-02-2015 | | | | | | |
| 図 | CALIBRATION CH | ECK - (ONLY ONE 8 | STANDARD IS TO BE U | JSED PER MAINTEN | ANCE REPORT) | | |
| | CALIBRATION CHECK - (ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT) Run three tests using a standard solution. All three tests must be within ±5% of the standard value and must have a spread of .005 or less, Mark the box corresponding to the standard solution being used. (PRINTOUT ATTACHED) | | | | | | |
| | 0.100% STANDARD - MUST READ BETWEEN 0.095% AND 0.105% INCLUSIVE 0.080% STANDARD - MUST READ BETWEEN 0.076% AND 0.084% INCLUSIVE 0.040% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE | | | | | | |
| TES | ST 1 w- ,099 | | TEST 2 a- ,099 | | TEST 3 w .099 | | |
| | | EST (PRINTOUT AT | TACHED) | | | | |
| INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT: (DO NOT INCLUDE SELF-ADMINISTERED TESTS) | | | | | | | |
| REF | FUSALS 0 (0 | 04) I | (.0509) | (.1014) ₃ | (,15-A9) ₁ | OVER.19 0 | |
| | ANY NEW PARTS AND DES | | MODIFICATION THAT WAS MADE | TO RESTORE THE INSTRUME | NT TO OPERATE SATISFAC | TORILY AND WITHIN ESTABLISHED LIMITS | |
| (001 | OTTIER SIDE IF NECESSAR | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| INS | PECTING OFFICE | 3 | | Accession for the contract of | | 新疆市公司的 | |
| SIGNA | TURE | / / _ | | | PRINT FULL NAME | | |
| TYPE 11 DEPORT DEFINE PRINCIPATION DATE | | | | Brad Kerns / Wayne Byrom TELEPHONE NUMBER | | | |
| TYPE 11 PERMIT NOMBERVEXPIRATION DATE 120427 12-27-14 / 220103 05-09-14 | | | | 816-271-5359 | | | |
| RETURN COMPLETED REPORT TO THE: Breath Alcohol Program, MO Department of Health and Senior Services, Southeast District Office | | | | | | | |
| 2875 James Blvd. Poplar Bluff, MO 63901 | | | | | | | |

CERTIFICATE OF ANALYSIS

MANUFACTURER AND SUPPLIER: RepCo Marketing, Inc. LOT NUMBER: 12002 EXPIRATION DATE: August 29, 2014 at 11:59 p.m.

RepCo Marketing, Inc. certifies the following:

RepCo Marketing, Inc. manufactured, tested and supplied Lot Number 12002 of Alcohol Certified Solution for simulators. Random samples of said lot number were analyzed by an independent laboratory utilizing a gas chromatograph and found to contain ______ gms/dl +/-.003 gms/dl wt/vol ethanol (95% Confidence).

The alcohol and distilled water used in the solution were found to be free of any interferring substance.

This solution will produce a vapor alcohol value of _.100 +/-3% gms/210L Breath when heated to 34 Degrees Celsius +/-0.2 Degrees Celsius in a simulator (95% Confidence).

The date of manufacture for this lot number is <u>August 30, 2012</u>

The expiration date for this lot number is <u>August 29, 2014</u> at 11:59 p.m.

This document is a true representation of the original Certificate of Analysis.

Cecil B. Garner, President RepCo Marketing, Inc.

Form RM 02

ACE THIS SIDE DOWN - THIS EDGE IN FIRST

BAC DataMaster

Evidence Ticket

STATE OF MISSOURI ST.JOSEPH POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201302 02/06/14

ESTING OFFICER:
KERNS/BRAD/M
FFICER I.D.: 2072
ERMIT NUMBER: 220427
XPIRATION DATE: 12/27/14
ISCELLANEOUS DATA:
FEB 14 MANT

--- SUPERVISOR MODE ---

| .000 | 14:21 |
|----------|--|
| VERIFIED | 14:21 |
| .099 | 14:22 |
| . 999 | 14:22 |
| . 099 | 14:23 |
| .000 | 14:23 |
| .099 | 14:24 |
| .000 | 14:24 |
| | VERIFIED .099 .000 .099 .000 .099 |

= 3 IM. = .1 VG. = .099

(No.

REORDER ALL SUPPLIES FROM N.P.A.S. P.O. BOX 1435, MANSFIELD, OH 44901

FACE THIS SIDE DOWN - THIS EDGE IN FIRST

BAC DataMaster

Evidence Ticket

STATE OF MISSOURI ST.JOSEPH POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201302 02/06/14 13:55

--- DIAGNOSTIC CHECK ---

COMPUTER:

ÖKAY

PROGRAM (04-07-2009):

OKAY

HEATERS

SAMPLE CHAMBER:

49c

FLOW DETECTOR:

OKAY

PUMP

HIGH SPEEDS

OKAY

DETECTOR:

OKAY

FILTERS:

OKAY

QUARTZ STANDARD:

OKAY

CALIBRATION:

OKAY

PRINTER TEST

!"#\$%&'()*+,-./0123456789:;<=>?@ABCDEFG HIJKLMMOPGRSTUVWXYZ[\]^_\abcdefghijklmno pqrstuvwxyz{|}}+

Card Stock No.

OPERATOR SIGNATUR

Card Sto

REORDER ALL SUPPLIES FROM N.P.A.S. P.O. BOX 1435, MANSFIELD, OH 44901

FACE THIS SIDE DOWN - THIS EDGE IN FIRST

BAC DataMaster

Evidence Ticket

STATE OF MISSOURI ST.JOSEPH POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201302 02/06/14

ARREST TIME: 13:00 SUBJECT NAME: KERNS/B/ DOB: 01/01/82 SEX: M STATE/D.L.: MO/NA ARRESTING OFFICER: KERNS/BRAD/M OFFICER I.D.: 2072 TESTING OFFICER: KERNS/BRAD/M OFFICER I.D.: 2072 PERMIT NUMBER: 220427 EXPIRATION DATE: 12/27/14 MISCELLANEOUS DATA: MAINT

--- BREATH ANALYSIS ---

¹BLANK TEST

. 000

14:06

INTERNAL STANDARD

VERIFIED

14:06

RADIO INTERFERENCE

OPERATOR SIGNATURE

Card Stock No. 60021

RECRIDER ALL SUPPLIES FROM N.P.A.S. P.O. BOX 1435, MANSFIELD, OH 44801

State of Missouri DEPARTMENT OF HEALTH



PERMIT TYPE II



WAYNE BYROM

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field repairs, and operate the following breath analyzer(s):

DATAMASTER; ALCO-SENSOR IV W/PRINTER

for the determination of the alcoholic content of blood from a sample of expired (alveolar) air. Issued under the provisions of sections 577.020 through 577.041, RSMo 1986.

| 05/09/2012 | Wante | | |
|--------------------|---|--|--|
| Date | Director of State Public Health Laboratory Margart T. Dunelly | | |
| Expires 05/09/2014 | Director, Department of Health | | |
| NO 500.0771 (7-99) | - Lab, 4 (R7-8) | | |

State of Missouri DEPARTMENT OF HEALTH



PERMIT TYPE II



BRAD M KERNS

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field repairs, and operate the following breath analyzer(s):

DATAMASTER; ALCO-SENSOR IV W/PRINTER

for the determination of the alcoholic content of blood from a sample of expired (alveolar) air. Issued under the provisions of sections 577.020 through 577.041, RSMo 1986.

| Date 12/27/2012 | Director of State Public Health Laboratory | | |
|----------------------|--|--|--|
| | | | |
| Number 220427 | Dal Vacherly Acting Director | | |
| Expires 12/27/2014 | J | | |
| Expires 12/2/12/01/1 | Director, Department of Health | | |
| MO 590-0771 (7-88) | Lab. 4 (A7-88) | | |